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213202.00506

First Named Inventor or Application Identifier

IAN M. PENN, ET AL.

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

UTILITY

PATENT APPLICATION

Express Mail Label No.

Attorney Docket No.

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APPLICATION ELEMENTS See M.P.E.P. chapter 600 concerning utility patent application contents.			ts. A	ADDRESS TO: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450					
					_	OD D			
1. 🛮		Fee Transmittal Form (Submit an original, and a duplicate for fee processing)		7.			DM or CD-R in du _l m <i>(Appendix)</i>	plicate, large	table or Computer
2.	Applicant claims small entity status. See 37 C.F.R. § 1.27.			8.			tide and/or Amino licable, all necessa		ence Submission
3. 🛛	Specification	1	Total Pages 31			a. 🗌	a. Computer Readable Form (C.R.F.)		
4. 🛛	Drawing(s)	35 U.S.C. §113)	Total Sheets 13			b. Specification Sequence Listing on:			
5. 🛛	Oath or Decl	laration	Total Sheets 2			i. CD-ROM or CD-R (2 copies); or			oies); or
	a. New	ly executed (original	nal or copy)			ii	. 🗌 paper		
		by from a prior application (37 C.F.R. § 1.63(d)) for continuation/divisional with Box 17 completed)				c. 🗌	Statements verifyi	ng identity (of above copies
	1.	DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).				AC	COMPANYING AF	PLICATION	PARTS
				9.		Assignm	nent Papers (cover sh	neet & docum	ent(s))
6. 🛛	Application I	Data Sheet. See 37		10	. 🗆		R. § 3.73(b) Statement Statement (b) Reference (b) Reference (b) Statement (c) Reference (c) Referen	nt 🛛	Power of Attorney
				11	. \square		n Translation Docu	ment (if app	olicable)
					_			_	
:				12	. 🗵		ation Disclosure ent (IDS)/PTO-14	△ 49	Copies of IDS Citations
				13	. 🗵	Prelim	inary Amendment		
			14	14. Return Receipt Postcard (M.P.E.P. § 503) (Should be specifically itemized)					
			15	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)					
			16	16. Change of Correspondence					
17. If a	17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:								
 ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. 09/672,768 (See Appln. Data Sheet) Prior application information: Examiner: W. Matthews Group/Art Unit: 3738 									
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.									
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CLAIMS	(1) FOR (2) NUMBER FILED (3) NUMBER EXTRA		(4) RATE	(5) CALCULATIONS		
	TOTAL CLAIMS (37 C.F.R. § 1.16(c))	1-20 =	0	X \$ 18.00 =	\$ 0.00	
	INDEPENDENT CLAIMS (37 C.F.R. § 1.16(b))	1-3 =	0	X \$ 86.00 =	\$ 0.00	
4.	MULTIPLE DEPENDENT	CLAIMS (if applicable) (37 C	.F.R. §1.16(d))	\$290.00 =	\$ 0.00	
·	·			BASIC FEE (37 C.F.R. § 1.16(a))	*	
			Total of	\$ 770.00		
-3	Reduction by 50% for filing by small entity (Note 37 C.F.R. §§ 1.9, 1.27, 1.28).					
	TOTAL =					

19.	Small entity status
	a. A small entity statement is enclosed
	 b. A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired. c. Is no longer claimed.
20.	Please charge the amount of \$_770.00 to Deposit Account No. 50-1710 to cover the filing fee. A duplicate copy of this paper is attached.
21.	Please charge the amount of \$ to Deposit Account No. 50-1710 to cover the recordal fee.
22.	The Commissioner is hereby authorized to charge the above fees, credit overpayments or charge any deficiencies to Deposit Account No. 50-1710:
	a. Fees required under 37 C.F.R. § 1.16.
	b. Fees required under 37 C.F.R. § 1.17.
	c. Fees required under 37 C.F.R. § 1.18

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED						
NAME	Richard P. Bauer, Registration No. 31,588					
SIGNATURE	Die De Bouer					
DATE	May 21, 2004					